U.S. Department of Labor Office of Labor-Management Standards Washington, DC 20210

## FORM LM-30 LABOR ORGANIZATION OFFICER AND EMPLOYEE REPORT

Form approved Office of Management and Budget No. 1215-0188 Expires 11-30-2006

This report is mandatory under P.L. 86-257, as amended. Failure to comply may result in criminal prosecution, fines, or civil penalties as provided by 29 U.S.C 439 or 440.



1. File Number U -

3. Name and address of person filing.

READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT.

2. Fiscal Year Covered From:

1 / 1 / 2004 Through: 12 / 31 / 2004

4. Name, file number, and address of labor organization.

Name Jerry D Putnam	Name Teamsters Local 997
Season Commence de La company	Labor Organization File Number 504-930
P.O. Box, Bldg., Room No., if any	P.O. Box, Building and Room Number, if any Suite 102
Street 165 S.W. Brushy Mound	Street 137 Sycamore School Road
City Burleson	City Fort Worth
State Texas ZIP Code + 4 76028	State Texas ZIP Code + 4 76134
5. Position in labor organization. Secretary Treasurer	
Enter appropriate data below If, during the past fiscal year, you or your spo (except as specified in the excl	ouse or minor child directly or indirectly had any of the following interests usions set forth in the instructions):
A. Held an interest in, engaged in transactions (including loans) with, or monetary value from an employer whose employees your organizat	derived income or other economic benefit of ion represents or is actively seeking to represent.
6. Name and address of Employer (including trade name, if any).	7.a. Nature of Interest, Transaction, or Income.
Name Miller Brewing Company SAB	Employee beer that was given away to all employees.  Most or all of the beer was non-salable beer
Trade Name, if any:	
P.O. Box, Bldg., Room No., if any	7.b. Amount.
Street 7001 South Freeway	
City Fort Worth	\$160
State Texas ZIP Code + 4 76134	
Signature	
15. Signature and verification. The undersigned declares, under penalty of Perjury and other applicable penalties of the law, that all of the information submitted in this report (including the information contained in any accompanying documents), has been examined by the signatory and is, to the best of the undersigned's knowledge and belief, true, correct, and complete. (See the section on penalties in the instructions.)	
Signed On-Matron	On 08/04/2005 817-295-3105
11112	Date Telephone Number

## DISCLAIMER

The transactions, dealings and interests that are reported in the attached Form LM-30 represent my good faith effort to reconstruct any reportable occurrences for calendar year 2004. If any items were omitted it was purely unintentional, and if it comes to my attention in the future that there is a matter, which should have been reported for calendar year 2004, I will file an amended Form LM-30.

Signature

Date